



Receipt

DOCKET NUMBER: 194588US8/mmc

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF:
Timothy R. MILLER, et al.

: GROUP: 2631

RECEIVED

NOV 02 2001

SERIAL NUMBER: 09/685,197

: ATTENTION:

Technology Center 2600

Application Division

FILED: October 10, 2000

Customer Corrections

FOR: MODE CONTROLLER FOR SIGNAL ACQUISITION AND TRACKING IN AN
ULTRA WIDEBAND COMMUNICATION SYSTEM

REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

The Patent Office is requested to provide a corrected Official Filing Receipt for the attached. If you have any questions, please do not hesitate to contact us.

No fees are required. However, in the event that a fee is required, please charge the appropriate amount to our Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Bradley D. Lytle
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Surinder Sachar
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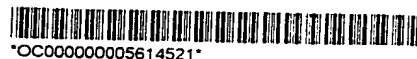
UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20221
WWW.USPTO.GOV

| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|-----------------|----------|------------|------------|
| 09/685,197 | 10/10/2000 | 2631 | 1316 | 194588US8 | 15 | 84 | 11 |

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1755 JEFFERSON DAVIS HIGHWAY
ARLINGTON, VA 22202

FILING RECEIPT



OC000000005614521

Date Mailed: 12/12/2000



Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Timothy K. Miller, Washington, DC ;
Richard Shaner, Laurel, MD ;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 12/12/2000

** SMALL ENTITY **

Title

Mode controller for signal acquisition and tracking in an ultra wideband communication system

Preliminary Class

375

Data entry by : DILLON, LAWANDA

Team : OIPE

Date: 12/12/2000



PLEASE NOTE THAT THE FIRST APPLICANT'S NAME IS INCORRECT. IT SHOULD READ AS FOLLOWS:

1ST= TIMOTHY R. MILLER, WASHINGTON, DC;

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Technology Center 2600

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OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

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Bib Data Sheet

CONFIRMATION NO. 4309

| | | | | |
|--|---|---------------------------------|---|---|
| SERIAL NUMBER 09/685,197 | FILING DATE 10/10/2000 RULE | CLASS 375 | GROUP ART UNIT 2634 | ATTORNEY DOCKET NO. 194588US8 |
| APPLICANTS Timothy R. Miller, Washington, DC; Richard Shaner, Laurel, MD; | | | | |
| ** CONTINUING DATA ***** | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/12/2000 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | | STATE OR COUNTRY DC | SHEETS DRAWING 15 | TOTAL CLAIMS 84 |
| Verified and Acknowledged Examiner's Signature _____ Initials _____ | | INDEPENDENT CLAIMS 11 | | |
| ADDRESS 22850 | | | | |
| TITLE Mode controller for signal acquisition and tracking in an ultra wideband communication system | | | | |
| FILING FEE RECEIVED 1316 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |

Receipt

DOCKET NUMBER: 195273US8/mmc

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



IN RE APPLICATION OF:
Timothy R. MILLER, et al.

: GROUP: 2631

SERIAL NUMBER: 09/685,196

: ATTENTION:
Application Division
Customer Corrections

FILED: October 10, 2000

FOR: ULTRAWIDE BANDWIDTH SYSTEM AND METHOD FOR FAST
SYNCHRONIZATION USING MULTIPLE DETECTION ARMS

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NOV 02 2001

Technology Center 2600

REQUEST FOR CORRECTED OFFICIAL FILING RECEIPT

Assistant Commissioner for Patents
Washington, D.C. 20231

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Respectfully submitted,

OBLON, SPIVAK, McCLELLAND,
MAIER & NEUSTADT, P.C.

Bradley D. Lytle
Attorney of Record
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Surinder Sachar
Registration No. 34,423



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| APPLICATION NUMBER | FILING DATE | GRP ART UNIT | FIL FEE REC'D | ATTY. DOCKET NO | DRAWINGS | TOT CLAIMS | IND CLAIMS |
|--------------------|-------------|--------------|---------------|-----------------|----------|------------|------------|
| 09/685,196 | 10/10/2000 | 2631 | 465 | 195273US8 | 22 | 25 | 3 |

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FILING RECEIPT



OC000000005777017

Date Mailed: 02/20/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Timothy K. Miller, Washington, DC ;
John W. McCorkle, Laurel, MD ;

Continuing Data as Claimed by Applicant

Foreign Applications

If Required, Foreign Filing License Granted 12/15/2000

** SMALL ENTITY **

Title

Ultrawide bandwidth system and method for fast synchronization using multiple detection arms

Preliminary Class

375

Data entry by : WYATT, DEBRA

Team : OIPE

Date: 02/20/2001



PLEASE NOTE THAT THE FIRST APPLICANT'S NAME IS INCORRECT. IT SHOULD READ AS FOLLOWS:

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OBLON SPIVAK MCCLELLAND



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CONFIRMATION NO. 4307



Bib Data Sheet

| | | | | | |
|--|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 09/685,196 | FILING DATE 10/10/2000 RULE | CLASS 375 | GROUP ART UNIT 2634 | ATTORNEY DOCKET NO. 195273US8 | |
| APPLICANTS Timothy R. Miller, Washington, DC; John W. McCorkle, Laurel, MD; | | | | | |
| ** CONTINUING DATA ***** | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 12/15/2000 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____ | | STATE OR COUNTRY DC | SHEETS DRAWING 22 | TOTAL CLAIMS 25 | INDEPENDENT CLAIMS 3 |
| ADDRESS 22850 | | | | | |
| TITLE Ultrawide bandwidth system and method for fast synchronization using multiple detection arms | | | | | |
| FILING FEE RECEIVED 465 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |